



IFW 1648

PTO/SB/21 (09-04)

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

4

Application Number

10/559,752

Filing Date

December 6, 2005

First Named Inventor

Andre Lieber

Art Unit

1648

Examiner Name

Unassigned

Attorney Docket Number

016336-002700US

ENCLOSURES (Check all that apply)

- | | | |
|---|---|--|
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance Communication to TC |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment/Reply | <input type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Terminal Disclaimer | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Request for Refund | Communication (2 pp.); and, |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> CD, Number of CD(s) _____ | Return Postcard. |
| | <input type="checkbox"/> Landscape Table on CD | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | Remarks | The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. |
| <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application | | |
| <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Neil G. Miyamoto		
Date	May 19, 2006	Reg. No.	50,370

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature

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Yvonne Mock

Date

May 19, 2006



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On May 19, 2006

TOWNSEND and TOWNSEND and CREW LLP

By: *Yvonne Mock*

Yvonne Mock

PATENT
Docket No.: 016336-002700US
Client Ref. No.: 3784P.1US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Andre Lieber et al.

Application No.: 10/559,752

Filed: December 6, 2005

For: CAPSID-MODIFIED
ADENOVIRUS VECTORS AND
METHOD OF USING THE SAME

Confirmation No.: 5845

Examiner: Unassigned

Art Unit: 1648

STATUS INQUIRY

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

A review of the PAIR report indicates that the above-captioned application apparently has sequence disclosure problems. Applicants submitted the Response to Notification to Comply with Requirements for Patent Applications Containing Nucleotide and/or Amino Acid Sequence Disclosures and a Preliminary Amendment on March 16, 2006. Applicants believe that all formal requirements have been met and that the application should proceed to examination.

Accordingly, Applicants respectfully request a status inquiry as to why this application is indicated as having sequence disclosure problems.

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PATENT

If the Examiner believes a telephone conference would expedite prosecution of this application, please telephone the undersigned at (650) 326-2400.

Respectfully submitted,



Neil G. Miyamoto
Reg. No. 50,370

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